

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

1 2 F E 4 M 5

BROCK FOR VERMONT

ADDRESS (number and street)

861 WILLISTON ROAD, SUITE 8

#1024

Check if different  
than previously  
reported. (ACC)

SOUTH BURLINGTON

VT

05403

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C

C00794164

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

STATE ▼ DISTRICT

VT

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the  
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the  
State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

DO, ANDY, , ,

Type or Print Name of Treasurer

DO, ANDY, , ,

Signature of Treasurer

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office  
Use  
Only**FEC FORM 3**  
(Revised 05/2016)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 2 / 36

Write or Type Committee Name  
**BROCK FOR VERMONT**

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
 01 / 01 / 2022

To:

M M / D D / Y Y Y Y  
 03 / 31 / 2022

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)) ....	28650.00	121683.02
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	28650.00	121683.02
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	339301.52	591180.02
(b) Total Offsets to Operating Expenditures (from Line 14) .....	25.00	28.50
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	339276.52	591151.52
8. Cash on Hand at Close of Reporting Period (from Line 27) .....	112921.14	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	582389.00	

## For further information contact:

Federal Election Commission  
 999 E Street, NW  
 Washington, DC 20463

Toll Free 800-424-9530  
 Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

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FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

BROCK FOR VERMONT

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	2	2

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	2

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

## 11. CONTRIBUTIONS (other than loans) FROM:

## (a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

28200.00

50970.00

(ii) Unitemized.....

450.00

829.00

(iii) TOTAL of contributions from individuals ▶

28650.00

51799.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

0.00

(d) The Candidate.....

0.00

69884.02

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

28650.00

121683.02

## 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....

0.00

0.00

## 13. LOANS:

(a) Made or Guaranteed by the Candidate.....

382389.00

582389.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

382389.00

582389.00

## 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....

25.00

28.50

## 15. OTHER RECEIPTS (Dividends, Interest, etc.) .....

0.64

0.64

## 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

411064.64

704101.16

**DETAILED SUMMARY PAGE**

FEC Form 3 (Revised 05/2016)

of Disbursements

PAGE 4 / 36

**II. DISBURSEMENTS****COLUMN A  
Total This Period****COLUMN B  
Election Cycle-to-Date**

17. OPERATING EXPENDITURES.....

339301.52

591180.02

18. TRANSFERS TO OTHER  
AUTHORIZED COMMITTEES .....

0.00

0.00

19. LOAN REPAYMENTS:

(a) Of Loans Made or Guaranteed  
by the Candidate.....

0.00

0.00

(b) Of All Other Loans .....

0.00

0.00

(c) TOTAL LOAN REPAYMENTS  
(add Lines 19(a) and (b)).....

0.00

0.00

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other  
Than Political Committees .....

0.00

0.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees  
(such as PACs) .....

0.00

0.00

(d) TOTAL CONTRIBUTION REFUNDS  
(add Lines 20(a), (b), and (c)).....

0.00

0.00

21. OTHER DISBURSEMENTS .....

0.00

0.00

22. **TOTAL DISBURSEMENTS**

(add Lines 17, 18, 19(c), 20(d), and 21) ►

339301.52

591180.02

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

41158.02

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....

411064.64

25. SUBTOTAL (add Line 23 and Line 24).....

452222.66

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

339301.52

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD  
(subtract Line 26 from Line 25).....

112921.14

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**BROCK FOR VERMONT**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>ALLENDE, FERNANDO, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 28 / 2022	
Mailing Address 425 CARR 693 # 1 888			<b>Transaction ID : RGEXWW3NSEC5RVQ4WF</b>	
City DORADO	State ZZ	Zip Code 00646	Amount of Each Receipt this Period 2900.00	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer SELF EMPLOYED		Occupation ENTERTAINER AND ARTIST		
Receipt For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2900.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>ALLENDE, MARIA, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 28 / 2022	
Mailing Address 425 CARR 693 # 1 888			<b>Transaction ID : RRYR7YNXCK5SC7B7Z86V</b>	
City DORADO	State ZZ	Zip Code 00646	Amount of Each Receipt this Period 2900.00	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer SELF EMPLOYED		Occupation PRODUCER		
Receipt For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2900.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>BAILEY, EMIL, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 24 / 2022	
Mailing Address 257 CALLE CRUZ			<b>Transaction ID : R7S4S8F6DN4PGQRAAXXf</b>	
City SAN JUAN	State ZZ	Zip Code 00901	Amount of Each Receipt this Period 2900.00	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer UNEMPLOYED		Occupation UNEMPLOYED		
Receipt For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2900.00		
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			8700.00	
<b>TOTAL</b> This Period (last page this line number only)..... ▶				

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**BROCK FOR VERMONT**

**A.** Full Name (Last, First, Middle Initial)  
**BRACKEN, VENZA, , ,**

Mailing Address 8465 W SAHARA AVENUE  
111-559

City LAS VEGAS	State NV	Zip Code 89117
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SYSTEMATIC VENTURES	Occupation OWNER
---	---------------------

Receipt For: 2022  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 24 / 2022

Transaction ID : RM3KKF7PSCRQ772H6E9C

Amount of Each Receipt this Period

2900.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**COLLINS, REEVE, , ,**

Mailing Address 1112 LAKESIDE AVENUE S

City SEATTLE	State WA	Zip Code 98144
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer UNEMPLOYED	Occupation UNEMPLOYED
--------------------------------	--------------------------

Receipt For: 2022  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 11 / 2022

Transaction ID : RXU3W5BHA8376GWJ85MI

Amount of Each Receipt this Period

2900.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**DOLAN, MARTIN, W, ,**

Mailing Address 2 CLIFTON PLACE

City IRVINGTON	State NY	Zip Code 10533
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer DOLAN & COMPANY	Occupation CORPORATE STRATEGY
-------------------------------------	----------------------------------

Receipt For: 2022  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 27 / 2022

Transaction ID : RH9FHH78AJWGQQ2N6BH

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

6300.00
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# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BROCK FOR VERMONT**

**A.** Full Name (Last, First, Middle Initial)  
**DOLAN, MARTIN, W, ,**

Mailing Address 2 CLIFTON PLACE

City IRVINGTON	State NY	Zip Code 10533
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer DOLAN & COMPANY	Occupation CORPORATE STRATEGY
-------------------------------------	----------------------------------

Receipt For: 2022  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 27 2022

Transaction ID : RJ6BWCJNNTU73YBJ42H9

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**DOLAN, MARTIN, W, ,**

Mailing Address 2 CLIFTON PLACE

City IRVINGTON	State NY	Zip Code 10533
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer DOLAN & COMPANY	Occupation CORPORATE STRATEGY
-------------------------------------	----------------------------------

Receipt For: 2022  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 27 2022

Transaction ID : RQ7BXNXEM595TGW2CQ4

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**FRIEDLAND, CHRISTIAN, , ,**

Mailing Address 337 DORADO BEACH E

City DORADO	State ZZ	Zip Code 00646
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer FRIEDLAND ENTERPRISES	Occupation PARTNER
---	-----------------------

Receipt For: 2022  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 13 2022

Transaction ID : R883USKMS5RSUJJ66V3U

Amount of Each Receipt this Period

2000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

3000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 OF 36

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**BROCK FOR VERMONT**

Full Name (Last, First, Middle Initial)

**A.**

**GROSS, TERRY, , ,**

Mailing Address 3834 BALFOUR AVENUE

City

OAKLAND

State

CA

Zip Code

94610

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GROSS & BELSKY LLP

Occupation

ATTORNEY

Receipt For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 29 2022

Transaction ID : RHCF3JTDSXYCFDQUB2X3

Amount of Each Receipt this Period

2900.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

**PEIZER, TERREN, , ,**

Mailing Address THE COTTAGES #7  
ROAD 693

City

DORADO

State

ZZ

Zip Code

00646

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

INVESTOR

Receipt For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 24 2022

Transaction ID : RBQNWQ224HCNB99YZPP

Amount of Each Receipt this Period

2900.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

**PIERCE, JEFFREY, , ,**

Mailing Address 510 SWEET BRIAR LANE

City

HOPKINS

State

MN

Zip Code

55343

FEC ID number of contributing  
federal political committee.

C

Name of Employer

EBERT

Occupation

CONSTRUCTION SUPERVISOR

Receipt For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 16 2022

Transaction ID : RAVY47WQRG6ADC6YSY7

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

6800.00



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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PAGE 9 OF 36

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BROCK FOR VERMONT**

**A.** Full Name (Last, First, Middle Initial)  
**SLAVIN, EOIN, , ,**  
Mailing Address 36 HENDRIE AVENUE

City State Zip Code  
RIVERSIDE CT 06878

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PERCIVAL

Occupation  
INVESTMENT MANAGER

Receipt For: 2022  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 18 2022

Transaction ID : RFNTX9DCFDH26SBP2C

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**WALKER, SCOTT, , ,**  
Mailing Address 1362 AVE MAGDALENA

City State Zip Code  
SAN JUAN ZZ 00907

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ATTORNEY

Occupation  
SELF EMPLOYED

Receipt For: 2022  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 13 2022

Transaction ID : R69YDR4DCNEDDWS9HJK

Amount of Each Receipt this Period

2900.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

3400.00

28200.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 36

☐ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☒ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
**BROCK FOR VERMONT**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>PIERCE, BROCK, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 02 / 28 / 2022	
Mailing Address 861 WILLISTON ROAD, SUITE 8 #1024			<b>Transaction ID : RUW9CJ3FQM4R5MRVQ3V</b>	
City SOUTH BURLINGTON	State VT	Zip Code 05403	Amount of Each Receipt this Period 120000.00	
FEC ID number of contributing federal political committee. C S2VT00227			<input type="checkbox"/> Memo Item	
Name of Employer SELF		Occupation BUSINESS OWNER		
Receipt For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 320000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>PIERCE, BROCK, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 03 / 18 / 2022	
Mailing Address 861 WILLISTON ROAD, SUITE 8 #1024			<b>Transaction ID : RTFG3GR3TC9A2GEJSZSY</b>	
City SOUTH BURLINGTON	State VT	Zip Code 05403	Amount of Each Receipt this Period 117000.00	
FEC ID number of contributing federal political committee. C S2VT00227			<input type="checkbox"/> Memo Item	
Name of Employer SELF		Occupation BUSINESS OWNER		
Receipt For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 437000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>PIERCE, BROCK, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 03 / 18 / 2022	
Mailing Address 861 WILLISTON ROAD, SUITE 8 #1024			<b>Transaction ID : RGSWWJHK5ZPR8S3GBP2</b>	
City SOUTH BURLINGTON	State VT	Zip Code 05403	Amount of Each Receipt this Period 45389.00	
FEC ID number of contributing federal political committee. C S2VT00227			<input type="checkbox"/> Memo Item	
Name of Employer SELF		Occupation BUSINESS OWNER		
Receipt For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 482389.00		
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			282389.00	
<b>TOTAL</b> This Period (last page this line number only)..... ▶				

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**BROCK FOR VERMONT**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>PIERCE, BROCK, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 03 / 31 / 2022	
Mailing Address 861 WILLISTON ROAD, SUITE 8 #1024			<b>Transaction ID : RWESENF4THE7EQ78NZFV</b>	
City	State	Zip Code		
SOUTH BURLINGTON	VT	05403		
FEC ID number of contributing federal political committee.		C S2VT00227		
Name of Employer SELF		Occupation BUSINESS OWNER		
Receipt For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 582389.00		
			Amount of Each Receipt this Period 100000.00	
			<input type="checkbox"/> Memo Item	

<b>B.</b> Full Name (Last, First, Middle Initial)			Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address				
City	State	Zip Code		
FEC ID number of contributing federal political committee.		C		
Name of Employer		Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼		
		Amount of Each Receipt this Period		
		<input type="checkbox"/> Memo Item		

<b>C.</b> Full Name (Last, First, Middle Initial)			Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address				
City	State	Zip Code		
FEC ID number of contributing federal political committee.		C		
Name of Employer		Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼		
		Amount of Each Receipt this Period		
		<input type="checkbox"/> Memo Item		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	100000.00
<b>TOTAL</b> This Period (last page this line number only).....	382389.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 12 OF 36

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input checked="" type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

**BROCK FOR VERMONT**

**A.** Full Name (Last, First, Middle Initial)  
**3DNA DBA NATIONBUILDER**  
 Mailing Address 520 S. GRAND AVENUE  
 SUITE 2000

City	State	Zip Code
LOS ANGELES	CA	90071

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2022

Transaction ID : RE9K92BTZESB46K3H6D9

Amount of Each Receipt this Period

25.00

☐ Memo Item

CREDIT AGAINST FEES

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

25.00

25.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 36

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input checked="" type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**BROCK FOR VERMONT**Full Name (Last, First, Middle Initial)  
**A. THE CHESD FUND**

Mailing Address 600 REISTERSTOWN RD

City  
PIKESVILLEState  
MDZip Code  
21208FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4.14

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	22	/	2022

Transaction ID : R3MT9B7HPVCNKFMMS8C

Amount of Each Receipt this Period

0.64

☐ Memo ItemFull Name (Last, First, Middle Initial)  
**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
	/		/	

Amount of Each Receipt this Period

☐ Memo ItemFull Name (Last, First, Middle Initial)  
**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
	/		/	

Amount of Each Receipt this Period

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

0.64

0.64

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 36

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

**BROCK FOR VERMONT**

Full Name (Last, First, Middle Initial)

**A. 3DNA DBA NATIONBUILDER**Mailing Address 520 S. GRAND AVENUE  
SUITE 2000City  
LOS ANGELESState  
CAZip Code  
90071Purpose of Disbursement  
DATA SUBSCRIPTION

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
03	22	2022

FEC Identification Number

C

Amount of Each Disbursement this Period

16957.50

Transaction ID : DER69NMF6DGMTTDR2JS8

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DIGITAL PUBLIC RELATIONS LLC**Mailing Address 99 WALL STREET  
SUITE 3455City  
NEW YORKState  
NYZip Code  
10005Purpose of Disbursement  
PUBLIC RELATIONS AND MEDIA CONSULTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
03	21	2022

FEC Identification Number

C

Amount of Each Disbursement this Period

15000.00

Transaction ID : DMJZJX47TWVDMZUP5CJC

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DONORBOX**Mailing Address 601 KING STREET  
SUITE 200City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
PROCESSING FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
01	13	2022

FEC Identification Number

C

Amount of Each Disbursement this Period

30.00

Transaction ID : DU7M58FZN3WB8ZEZ6EHH

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

31987.50

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 36

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

**BROCK FOR VERMONT**

Full Name (Last, First, Middle Initial)

**A. DONORBOX**Mailing Address 601 KING STREET  
SUITE 200City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
PROCESSING FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	2		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

0.75

Transaction ID : DZ9T2NUMCH8MCD8DSMY5

☐ Memo Item**B. DONORBOX**Mailing Address 601 KING STREET  
SUITE 200City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
PROCESSING FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	4		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

43.50

Transaction ID : DZ6H5NNYVNTKMSG76ZUM

☐ Memo Item**C. DONORBOX**Mailing Address 601 KING STREET  
SUITE 200City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
PROCESSING FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	4		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

43.50

Transaction ID : D9WUY6VKG5CT5MNTYX6V

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

87.75

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 36

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**BROCK FOR VERMONT**

Full Name (Last, First, Middle Initial)

**A. DONORBOX**Mailing Address 601 KING STREET  
SUITE 200City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
PROCESSING FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	4		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

43.50

Transaction ID : DDUJG2P42TN2V5BTWFPU

☐ Memo Item**B. DONORBOX**Mailing Address 601 KING STREET  
SUITE 200City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
PROCESSING FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	7		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

7.50

Transaction ID : DUMYP98RRT9VUEYVFYNK

☐ Memo Item**C. DONORBOX**Mailing Address 601 KING STREET  
SUITE 200City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
PROCESSING FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	8		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

43.50

Transaction ID : DHSV5299QX7V3AQRMAP4

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

94.50

**TOTAL** This Period (last page this line number only).....▶



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 36

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**BROCK FOR VERMONT**

Full Name (Last, First, Middle Initial)

**A. DONORBOX**Mailing Address 601 KING STREET  
SUITE 200City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
PROCESSING FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	8		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

43.50

Transaction ID : D8Y2VHM9CJ7GB6Q8VFFC

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DONORBOX**Mailing Address 601 KING STREET  
SUITE 200City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
PROCESSING FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	9		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

43.50

Transaction ID : DWTRGKNPTXCYNJBDUT

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DONORBOX**Mailing Address 601 KING STREET  
SUITE 200City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
PROCESSING FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	4		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

1.50

Transaction ID : DZ3TY6PWBKHQKNE5Q5SZ

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

88.50

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 36

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**BROCK FOR VERMONT**

Full Name (Last, First, Middle Initial)

**A. DONORBOX**Mailing Address 601 KING STREET  
SUITE 200City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
PROCESSING FEE

003

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		09		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

0.75

Transaction ID : DBXKJZ4AGWMJAZ46SYB5

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DONORBOX**Mailing Address 601 KING STREET  
SUITE 200City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
PROCESSING FEE

003

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		16		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

15.00

Transaction ID : DSG3DY69J7S8GQXWTUWS

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DONORBOX**Mailing Address 601 KING STREET  
SUITE 200City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
PROCESSING FEE

003

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		18		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

7.50

Transaction ID : DR4FXTN58WUHB99QWR2V

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

23.25

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 36

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**BROCK FOR VERMONT**

Full Name (Last, First, Middle Initial)

**A. DONORBOX**Mailing Address 601 KING STREET  
SUITE 200City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
PROCESSING FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
02	22	2022

FEC Identification Number

C

Amount of Each Disbursement this Period

0.75

Transaction ID : DNR6933SZRQPAW7MAJYR

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DONORBOX**Mailing Address 601 KING STREET  
SUITE 200City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
PROCESSING FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
02	27	2022

FEC Identification Number

C

Amount of Each Disbursement this Period

7.50

Transaction ID : DYMU34KUG7CZRCQXJZSB

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DONORBOX**Mailing Address 601 KING STREET  
SUITE 200City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
PROCESSING FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
03	11	2022

FEC Identification Number

C

Amount of Each Disbursement this Period

43.50

Transaction ID : DKGPUAPZUR533CUVW6W!

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

51.75

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 36

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**BROCK FOR VERMONT**

Full Name (Last, First, Middle Initial)

**A. DONORBOX**Mailing Address 601 KING STREET  
SUITE 200City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
PROCESSING FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	1		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

1.50

Transaction ID : D6DXPWBP4U2SFQKVK8B9

☐ Memo Item**B. DONORBOX**Mailing Address 601 KING STREET  
SUITE 200City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
PROCESSING FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	2		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

0.75

Transaction ID : DSJKU2XZVQBAARCP3YX8

☐ Memo Item**C. DONORBOX**Mailing Address 601 KING STREET  
SUITE 200City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
PROCESSING FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	2		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

0.75

Transaction ID : D9PSSXRNT5CM84FC54JM

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 36

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

**BROCK FOR VERMONT**

Full Name (Last, First, Middle Initial)

**A. DONORBOX**Mailing Address 601 KING STREET  
SUITE 200City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
PROCESSING FEE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
03	27	2022

FEC Identification Number

C

Amount of Each Disbursement this Period

7.50

Transaction ID : DWW45J868S52F7TZRSTP

☐ Memo Item**B. ELECTIONS, LLC**Mailing Address 1050 CONNECTICUT AVENUE NW  
SUITE 500City  
WASHINGTONState  
DCZip Code  
20036Purpose of Disbursement  
POLITICAL LAW COMPLIANCE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
01	31	2022

FEC Identification Number

C

Amount of Each Disbursement this Period

20000.00

Transaction ID : D5V6KYK9WJ6GY6V8T363

☐ Memo Item**C. ELECTIONS, LLC**Mailing Address 1050 CONNECTICUT AVENUE NW  
SUITE 500City  
WASHINGTONState  
DCZip Code  
20036Purpose of Disbursement  
POLITICAL LAW COMPLIANCE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
02	28	2022

FEC Identification Number

C

Amount of Each Disbursement this Period

40000.00

Transaction ID : DQ758BUSHRGH4T73TFHZ

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

60007.50

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 22 OF 36

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

**BROCK FOR VERMONT**

Full Name (Last, First, Middle Initial)

**A. FRONTRUNNER, LLC**

Mailing Address PO BOX 1

City  
ROSWELLState  
GAZip Code  
30077Purpose of Disbursement  
CAMPAIGN FINANCE SOFTWARE SUBSCRIPTION

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	4		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

145.00

Transaction ID : DWHTTJ7NCWYW6D4QU4Y9

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FRONTRUNNER, LLC**

Mailing Address PO BOX 1

City  
ROSWELLState  
GAZip Code  
30077Purpose of Disbursement  
CAMPAIGN FINANCE SOFTWARE SUBSCRIPTION

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	4		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

145.00

Transaction ID : DC8KUXU5MWY4E5FQWPVC

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FRONTRUNNER, LLC**

Mailing Address PO BOX 1

City  
ROSWELLState  
GAZip Code  
30077Purpose of Disbursement  
CAMPAIGN FINANCE SOFTWARE SUBSCRIPTION

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

145.00

Transaction ID : DBMBZETZ99RXXMYQAW9C

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

435.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 23 OF 36

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

**BROCK FOR VERMONT**

Full Name (Last, First, Middle Initial)

**A. GEORGETOWN ADVISORY**

Mailing Address 414 SAYRE DR.

City  
PRINCETONState  
NJZip Code  
08540Purpose of Disbursement  
GENERAL STRATEGY AND POLICY CONSULTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

60000.00

Transaction ID : DV4JRPCKCR92YZ757RBM

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GOOGLE**

Mailing Address 1600 AMPHITHEATRE PARKWAY

City  
MOUNTAIN VIEWState  
CAZip Code  
94043Purpose of Disbursement  
EMAIL HOSTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	2		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

149.76

Transaction ID : D7ZZF4EX9YQJ6Q3KYEG9

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GOOGLE**

Mailing Address 1600 AMPHITHEATRE PARKWAY

City  
MOUNTAIN VIEWState  
CAZip Code  
94043Purpose of Disbursement  
EMAIL HOSTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

149.76

Transaction ID : DTNFEDK2WSQ32XJW2RN9

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

60299.52

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 24 OF 36

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

**BROCK FOR VERMONT**

Full Name (Last, First, Middle Initial)

**A. NATIONAL POLITICAL GROUP, LLC DBA STERLING STRATEGIES**Mailing Address 99 WALL STREET  
SUITE 290City  
NEW YORKState  
NYZip Code  
10005Purpose of Disbursement  
GENERAL STRATEGY CONSULTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		16		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

40000.00

Transaction ID : DVF54XA23QWPK4V7QTDE

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NATIONAL POLITICAL GROUP, LLC DBA STERLING STRATEGIES**Mailing Address 99 WALL STREET  
SUITE 290City  
NEW YORKState  
NYZip Code  
10005Purpose of Disbursement  
GENERAL STRATEGY CONSULTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		18		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

45389.00

Transaction ID : DAC9855U4243YPKX7T4N

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NATIONAL POLITICAL GROUP, LLC DBA STERLING STRATEGIES**Mailing Address 99 WALL STREET  
SUITE 290City  
NEW YORKState  
NYZip Code  
10005Purpose of Disbursement  
GENERAL STRATEGY CONSULTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		24		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

80000.00

Transaction ID : D693QPRWDPAPUJRBWPC6I

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

165389.00

**TOTAL** This Period (last page this line number only).....▶



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 25 OF 36

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

**BROCK FOR VERMONT**

Full Name (Last, First, Middle Initial)

**A. SOLGENCE LLC**Mailing Address 28 K STREET SE  
UNIT PH06City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
COMMUNICATIONS CONSULTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

20000.00

Transaction ID : DS5PST3Z2UMZDHUMPJ9E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 510 TOWNSEND STREET

City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose of Disbursement  
PROCESSING FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		13		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

58.30

Transaction ID : D8RE56HPZGM2J32U9JGG

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 510 TOWNSEND STREET

City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose of Disbursement  
PROCESSING FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		22		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

1.75

Transaction ID : DFUKGNM9X4GP3E8X3CXJ

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

20060.05

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 26 OF 36

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

**BROCK FOR VERMONT**

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 510 TOWNSEND STREET

City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose of Disbursement  
PROCESSING FEE

003

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		24		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

84.40

Transaction ID : DXKXBGW84PF9FSQKH688

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 510 TOWNSEND STREET

City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose of Disbursement  
PROCESSING FEE

003

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		24		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

84.40

Transaction ID : DYMP62KHPZ5SN7R86JTB

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 510 TOWNSEND STREET

City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose of Disbursement  
PROCESSING FEE

003

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		24		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

84.40

Transaction ID : D3C428XJ9HS7B65H46GW

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

253.20

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 27 OF 36

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

**BROCK FOR VERMONT**

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 510 TOWNSEND STREET

City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose of Disbursement  
PROCESSING FEE

003

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	7		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

14.80

Transaction ID : D3TM84JY39Q8JN6XRUZN

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 510 TOWNSEND STREET

City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose of Disbursement  
PROCESSING FEE

003

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	8		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

84.40

Transaction ID : DM9HR62SUAYRYHBH2WX3

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 510 TOWNSEND STREET

City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose of Disbursement  
PROCESSING FEE

003

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	8		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

84.40

Transaction ID : DGRADHEP9EDJ4W7QV8UE

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

183.60

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 28 OF 36

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

**BROCK FOR VERMONT**

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 510 TOWNSEND STREET

City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose of Disbursement  
PROCESSING FEE

003

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	9		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

84.40

Transaction ID : DRWQGGTFCPM44Q4B4ENS

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 510 TOWNSEND STREET

City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose of Disbursement  
PROCESSING FEE

003

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	4		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

4.20

Transaction ID : DTZX7DYNJMVA5VBVJREA

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 510 TOWNSEND STREET

City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose of Disbursement  
PROCESSING FEE

003

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	9		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

1.75

Transaction ID : DJ5UCYAX87QDFFK47AXC

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

90.35

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 29 OF 36

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

BROCK FOR VERMONT

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 510 TOWNSEND STREET

City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose of Disbursement  
PROCESSING FEE

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2022

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	6		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

29.30

Transaction ID : DPFQ952TVE3NY3CUJ8A3

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 510 TOWNSEND STREET

City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose of Disbursement  
PROCESSING FEE

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2022

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	8		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

14.80

Transaction ID : D5H32ETWZTPP6QK3KQ4T

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 510 TOWNSEND STREET

City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose of Disbursement  
PROCESSING FEE

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2022

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	2		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

1.75

Transaction ID : DWADSCTY33KX2JNAAX6F

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

45.85

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 30 OF 36

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**BROCK FOR VERMONT**

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 510 TOWNSEND STREET

Date of Disbursement

M M	D D	Y Y Y Y
02	27	2022

City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose of Disbursement  
PROCESSING FEE

003

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

14.80

Transaction ID : DWQB8BTU4P5XE8UD8DAJ

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 510 TOWNSEND STREET

Date of Disbursement

M M	D D	Y Y Y Y
03	11	2022

City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose of Disbursement  
PROCESSING FEE

003

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

84.40

Transaction ID : DMP27BZ3B3MQB4A4ENKB

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 510 TOWNSEND STREET

Date of Disbursement

M M	D D	Y Y Y Y
03	11	2022

City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose of Disbursement  
PROCESSING FEE

003

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

3.20

Transaction ID : DC6FF3BC3X9RMY9YC3JW

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

102.40

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 31 OF 36

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

BROCK FOR VERMONT

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 510 TOWNSEND STREET

City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose of Disbursement  
PROCESSING FEE

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2022

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	2		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

2.25

Transaction ID : DSR2QNDCY7Z7TGZ3KX9N

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 510 TOWNSEND STREET

City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose of Disbursement  
PROCESSING FEE

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2022

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	2		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

1.75

Transaction ID : DBV2PARFW7YFBEXNHQTF

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 510 TOWNSEND STREET

City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose of Disbursement  
PROCESSING FEE

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2022

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

14.80

Transaction ID : D5XK3CPNNX2WTJ5KVK8D

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

18.80

**TOTAL** This Period (last page this line number only).....▶

339221.52

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 32 OF 36

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13bNAME OF COMMITTEE (In Full)  
**BROCK FOR VERMONT**

Transaction ID : LFBESJQEVGZGFBXNNS7M

**LOAN SOURCE** Full Name (Last, First, Middle Initial)☐ Memo Item**PIERCE, BROCK, , ,**

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address  
861 WILLISTON ROAD, SUITE 8  
#1024

City

SOUTH BURLINGTON

State

VT

ZIP Code

05403

☒ Personal Funds of the Candidate

Original Amount of Loan

200000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

200000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M 11 M /

D 29 D /

Y 2021 Y

M 12 M /

D 31 D /

Y 2022 Y

0.00 % (apr)

☐ Yes ☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

200000.00

**TOTALS** This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 33 OF 36

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13bNAME OF COMMITTEE (In Full)  
**BROCK FOR VERMONT**

Transaction ID : L2HKT8UTTDZBBPK3HW8K

**LOAN SOURCE** Full Name (Last, First, Middle Initial)☐ Memo Item**PIERCE, BROCK, , ,**

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address  
861 WILLISTON ROAD, SUITE 8  
#1024

City

SOUTH BURLINGTON

State

VT

ZIP Code

05403

☒ Personal Funds of the Candidate

Original Amount of Loan

120000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

120000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M 02 M /

D 28 D /

Y 2022 Y

M 12 M /

D 31 D /

Y 2022 Y

0.00

% (apr)

☐ Yes☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

120000.00

**TOTALS** This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 34 OF 36

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13bNAME OF COMMITTEE (In Full)  
**BROCK FOR VERMONT**

Transaction ID : LEMW76SCBAURQZ64M48B

**LOAN SOURCE** Full Name (Last, First, Middle Initial)☐ Memo Item**PIERCE, BROCK, , ,**

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address  
861 WILLISTON ROAD, SUITE 8  
#1024

City

SOUTH BURLINGTON

State

VT

ZIP Code

05403

☒ Personal Funds of the Candidate

Original Amount of Loan

117000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

117000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M 03 M /

D 18 D /

Y 2022 Y

M 12 M /

D 31 D /

Y 2022 Y

0.00 % (apr)

☐ Yes ☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

117000.00

**TOTALS** This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 35 OF 36

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13bNAME OF COMMITTEE (In Full)  
**BROCK FOR VERMONT**

Transaction ID : L93EU977TFGCRUZ38VGH

**LOAN SOURCE** Full Name (Last, First, Middle Initial)☐ Memo Item**PIERCE, BROCK, , ,**

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address  
861 WILLISTON ROAD, SUITE 8  
#1024

City

SOUTH BURLINGTON

State

VT

ZIP Code

05403

☒ Personal Funds of the Candidate

Original Amount of Loan

45389.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

45389.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M 03 M /

D 18 D /

Y 2022 Y

M 12 M /

D 31 D /

Y 2022 Y

0.00 % (apr)

☐ Yes ☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

45389.00

**TOTALS** This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 36 OF 36

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13bNAME OF COMMITTEE (In Full)  
**BROCK FOR VERMONT**

Transaction ID : LCVJ4R85PN3HZVS4UJBZ

**LOAN SOURCE** Full Name (Last, First, Middle Initial)☐ Memo Item**PIERCE, BROCK, , ,**

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address  
861 WILLISTON ROAD, SUITE 8  
#1024

City

SOUTH BURLINGTON

State

VT

ZIP Code

05403

☒ Personal Funds of the Candidate

Original Amount of Loan

100000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M 03 M /

D 31 D /

Y 2022 Y

M 12 M /

D 31 D /

Y 2022 Y

0.00

% (apr)

☐ Yes☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

100000.00

**TOTALS** This Period (last page in this line only).....▶

582389.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.